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# Fax

**To:** Examiner Peralta  
Art Unit: 2814

**From:** Leslie S. Szivos, Ph.D.

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**Fax:** 703-308-7724 *703-872-9319* **Pages:** 18 including cover

**Phone:** **Date:** 10/14/2003

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**Re:** U.S. Serial No. 09/683,328 **CC:**

IBM Ref: BUR920010171US1

Our Docket: 15017

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Dear Sir:

The following is attached hereto:

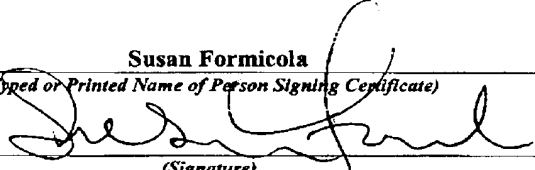
1. Amendment Transmittal in duplicate
2. Response under 37 CFR 1.116
3. Certificate of Facsimile in duplicate

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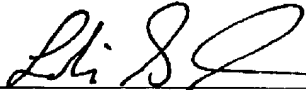
Applicants: David M. Fried, et al.  
Serial No.: 09/683,328  
Filed: December 14, 2001  
Title: IMPLANTED ASYMMETRIC DOPED POLYSILICON GATE FinFET  
Docket: BUR920010171US1 (15017)

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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No.
Applicant(s): David M. Fried, et al.			BUR920010171US1 (15017)
Serial No. 09/683,328	Filing Date 12/14/2001	Examiner Ginette Peralta	Group Art Unit 2814
Invention: IMPLANTED ASYMMETRIC DOPED POLYSILICON GATE FinFET			
<p>I hereby certify that this <u>RESPONSE UNDER 37 CFR 1.116</u> (Identify type of correspondence)</p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>202-308-7724 703-872-9319</u>)</p> <p>on <u>October 14, 2003</u> (Date)</p> <p><u>Susan Formicola</u> (Typed or Printed Name of Person Signing Certificate)</p> <p><u></u> (Signature)</p> <p>Note: Each paper must have its own certificate of mailing.</p>			

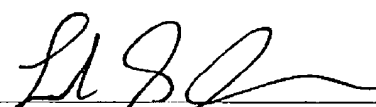
P18/REV01

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				Docket No. <b>BUR920010171US1 (15017)</b>	
Applicant(s): <b>David M. Fried, et al.</b>					
Serial No. <b>09/683,328</b>	Filing Date <b>12/14/2001</b>	Examiner <b>Ginette Peralta</b>	Group Art Unit <b>2814</b>		
Invention: <b>IMPLANTED ASYMMETRIC DOPED POLYSILICON GATE FinFET</b>					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	25 -	28 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>
 <input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <b>09-0456/IBM</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.  <div style="display: flex; justify-content: space-between; align-items: flex-end;"><div style="text-align: center;"> _____ <i>Signature</i></div><div>Dated: <b>October 14, 2003</b></div></div> <div style="display: flex; justify-content: space-between; align-items: flex-start; margin-top: 10px;"><div><b>Leslie S. Szivos</b> <b>Registration No. 39,394</b>  <b>Customer No. 23389</b></div><div style="border: 1px solid black; padding: 5px; width: 30%; text-align: center;"><div style="font-size: small;">I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</div><div style="border-top: 1px solid black; margin-top: 10px; font-size: x-small;">Signature of Person Mailing Correspondence</div><div style="border-top: 1px solid black; margin-top: 10px; font-size: x-small;">Typed or Printed Name of Person Mailing Correspondence</div></div></div> <div style="margin-top: 20px;">cc:</div>					

P11LARGE/REV06

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No.
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Serial No. 09/683,328	Filing Date 12/14/2001	Examiner Ginette Peralta	Group Art Unit 2814
Invention: IMPLANTED ASYMMETRIC DOPED POLYSILICON GATE FinFET			
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<p>Note: Each paper must have its own certificate of mailing.</p>			

P18/REV01

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>			Docket No. <b>BUR920010171US1 (15017)</b>		
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INDEP. CLAIMS	3 -	3 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>
<div style="margin-top: 20px;"><input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <b>09-0456/IBM</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div> <div style="margin-top: 20px; text-align: center;"> _____ <i>Signature</i></div> <div style="margin-top: 10px;">Dated: <b>October 14, 2003</b></div> <div style="margin-top: 10px;">Leslie S. Szivos Registration No. 39,394  Customer No. 23389</div> <div style="margin-top: 20px; border: 1px solid black; padding: 5px;"><div style="display: flex; justify-content: space-between;"><div>CC:</div><div style="text-align: right;"><div style="border: 1px solid black; padding: 5px; width: 100%;">I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. <div style="text-align: center; margin-top: 10px;"><i>Signature of Person Mailing Correspondence</i></div><div style="text-align: center; margin-top: 10px;">_____ <i>Typed or Printed Name of Person Mailing Correspondence</i></div></div></div></div></div>					

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